

For Office Use:
Supply Fee Paid: _____
Date: _____ Check # _____



WESTMINSTER

After School Art Application
2019-2020 School Year
(One form per child, please)

Student's Name: _____ Grade: _____

Parent/Guardian's Name: _____

Address: _____

Telephone: _____

Enrolling for days: _____ Monday 1-2 grades (12:40-2:40)
\$50 supply/registration fee and \$225 per semester

_____ Tuesday 3-5 grades (12:40-2:40)
\$50 supply/registration fee and \$300 per semester

Payment Method – ***Please return registration fee with application. Semester fees will be charged through FACTS: The fall semester will autodraft September 20, and the spring semester will autodraft February 20.***

Please list any allergies or health conditions of which we need to be aware:

Please remember that a carpool number is required for anyone picking up your child.

I understand that I will be responsible for the fees charged for After School Art each semester.

Parent/Guardian's Signature: _____ Date: _____

Please return application with supply fee to the school office.

The deadline to register is Wednesday, May 15.